

## KARIBU LOAN APPLICATION FORM

### Purpose

This is an advance to enable new teachers settle in their new stations.

No.	Terms and Conditions	No.	Required Documents
1.	Applicable interest rate is 1.5% per month	1.	Posting letter from TSC
2.	Eligible to newly employed teachers	2.	Certified id copy
3.	Repayment period is 3 months upon receipt of 1st salary	3.	Witnessed by the Principal or Deputy Principal
4.	The maximum loan amount for <b>Permanent teachers</b> is KShs. 60,000/= disbursed in 3 tranches of KShs. 20,000/= every month The maximum loan amount for <b>Intern teachers</b> is KShs. 30,000/= disbursed in 3 tranches of KShs. 10,000/= every month	4.	One guarantor
5.	Mode of recovery is salary. The credit shall be paid direct to the Member's FOSA account The credit must be guaranteed by at least one active Mwalimu National Member	5.	Copy of TSC casualty returns
6.	Loan application form to be accompanied by Membership Application and FOSA Salary forms to Mwalimu National.		

You hereby on execution of this form as an applicant explicitly and unambiguously consents to the collection, use and transfer, in electronic or other form, your personal data as described in this document by and among, as applicable, the Sacco and its subsidiaries for the purpose of assessing and processing this loan application and any future product analysis and marketing whether in electronic or other form.

**A** Applicant's Name (in full): \_\_\_\_\_

TSC/PF No. \_\_\_\_\_ ID No. \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

FOSA Acc. No: \_\_\_\_\_

**B** School/institution: \_\_\_\_\_ County: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer Address: \_\_\_\_\_

Code: \_\_\_\_\_ Dept.: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Terms of employment (*tick as applicable*): Permanent  Intern

**C** Amount of advance applied KShs. \_\_\_\_\_ in words \_\_\_\_\_

Type of advance: Karibu loan      Repayable in 3 months.

Consent for credit referencing in case of default: \_\_\_\_\_

Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**D To be completed by guarantors**

You hereby on execution of this form as an guarantor explicitly and unambiguously consents to the collection, use and transfer, in electronic or other form, your personal data as described in this document by and among, as applicable, the Sacco and its subsidiaries for the purpose of assessing and processing this loan application and any future product analysis and marketing whether in electronic or other form.

Amount of credit guaranteed is KShs. \_\_\_\_\_ in words \_\_\_\_\_

**Guarantors**

No.	Name	Mobile No.	TSC/PF No.	ID No.	Address	Code	Sign
1.							
2.							

**E** Endorsement by Principal/Deputy Principal (Name) \_\_\_\_\_

Date: \_\_\_\_\_ Sign: \_\_\_\_\_ Official stamp: \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

**1. CREDIT EXAMINATION BY CREDIT OFFICER**

Recommended amount: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mode of recovery: \_\_\_\_\_ Repayment period: \_\_\_\_\_

**2. CREDIT APPROVAL BY MANAGER**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**3. CREDIT POSTING**

Amount posted: \_\_\_\_\_ FOSA Account: \_\_\_\_\_

Full Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_